



A summary of articles with a women-centred focus on HIV, sexually transmitted infections, prevention issues and more. Please contact the source cited or Positive Women's Network if you'd like more information.

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## PREVENTION ISSUES AND CHALLENGES

### American Academy of Pediatrics To Review Policy on Male Circumcision After Studies Find Procedure Reduces Men's HIV Infection Risk

The American Academy of Pediatrics is reviewing its neutral policy on male circumcision following three recent studies in Kenya, Uganda and South Africa that found the procedure could reduce a man's risk of HIV infection, AAP President Jay Berkelhamer said recently, the AP/Fresno Bee reports (Konrad, AP/Fresno Bee, 6/18).

According to final data from two NIH-funded studies – conducted in Uganda and Kenya and published in the Feb. 23 issue of the journal Lancet – routine male circumcision could reduce a man's risk of HIV infection through heterosexual sex by 65%. In response to the findings, the World Health Organization and UNAIDS in March recommended the

procedure as a way to help reduce the spread of HIV. The results of the Uganda and Kenya studies

mirrored similar results of a study conducted in South Africa in 2005.

The organization, which represents 60,000 pediatricians and helps set pediatric policy for the American Medical Association, has “never strongly endorsed or repudiated” male circumcision, according to the AP/Fresno Bee. In a statement released in 1999, the group noted that the procedure, particularly when performed without painkillers, could result in “pain and physiologic stress,” the AP/Fresno Bee reports. “Existing scientific evidence demonstrates potential medical benefits of new-

born male circumcision,” the 1999 statement said, adding, “However, these data are not sufficient to recommend routine neonatal circumcision.”

“We believe when there's this kind of information coming into play – more and more evidence in various journals – we need to go back carefully and review our policies,” Berkelhamer said about the new data on HIV and circumcision, adding, “We recommend things for all children when medical evidence is overwhelming compelling.” Berkelhamer said the organization's researchers are in the “literature review” phase and are expected to issue a new policy statement in six months to one year. He added that it is too early to

tell if the group plans to endorse routine male circumcision and that he would not recommend the procedure to new or expectant

parents. Berkelhamer said that he is “not terribly uncomfortable with policy as currently written.”

According to the AP/Fresno Bee, the AAP policy statement on circumcision “carr[ies] weight” with insurers and Medicaid. Health care experts said Medicaid programs in several states began restricting coverage of routine, nontherapeutic circumcision follow the group's 1999 statement, which is one of the several factors that has led to decreasing circumcision rates in the U.S.

**The Canadian Paediatric Society recommends: “Circumcision of newborns should not be routinely performed,” although their website notes that this is under review as of May 2007.**

see CIRCUMCISION POLICY REVIEW page 3



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## PREVENTION ISSUES AND CHALLENGES

### FDA To Conduct Surveys About STI, Pregnancy Prevention Language on Condom Packaging

FDA plans to survey 1,200 people in shopping malls nationwide on their understanding of a condom's efficacy in preventing sexually transmitted infections, including HIV, and unplanned pregnancies based on current labeling, the agency said in a notice on its Web site, Bloomberg/Arizona Republic reports. According to the notice, survey responses will be "considered in FDA's condom labeling recommendations to provide important risk/benefit and use information associated with condoms in easily understood language."

Congress in 2000 directed FDA to "determine whether [condom] labels are medically accurate regarding the overall effectiveness or lack of effectiveness," Bloomberg/Republic reports. The agency in a 2005 review found that many people who use condoms are unsure how often the contra-

ceptive fails to prevent pregnancy with typical use or that they provide less protection from certain STIs, such as genital herpes, Bloomberg/Republic reports. FDA in 2005 also proposed that labels on condom boxes and wrappers show data on unplanned pregnancies and varying levels of protection against STIs (Bloomberg/Arizona Republic, 6/14).

In addition, the agency in November 2005 published a draft guidance document for latex condom manufacturers. The document included a proposal that labels be required to state that condoms "greatly reduce but do not eliminate" the risk of pregnancy and HIV infection when used correctly during sexual intercourse but provide "less protection" from other STIs, including human papillomavirus and herpes, because those STIs can be spread through skin-to-skin contact. However, the guidance also says that "using latex condoms every time you have sex may still give you some benefits against these" STIs (Kaiser Daily HIV/AIDS Report, 6/22/06). FDA also recommended that condoms with spermicidal lubricant nonoxynol-9 include a warning that the lubricant can cause irritation that raises the risk of HIV transmission.

Any label changes would apply only to male condoms made with natural rubber latex, which account for almost 98% of sales in the U.S., FDA said. Guidelines for products made with lambskin or synthetic materials will be issued at a later date, the agency said (Bloomberg/Arizona Republic, 6/14).

Source: Kaiser Daily HIV/AIDS Report - Monday, June 18, 2007

#### Circumcision policy review

According to data from the National Health and Social Life Survey, the U.S. circumcision rate peaked at nearly 90% of male infants in the early 1960s and began falling in the 1970s. Government figures for 2004, the most recent year for which data is available, show that about 57% of all male infants delivered in hospitals were circumcised. The trend also has accompanied a shift in U.S. residents' attitudes toward medicine and their bodies, the AP/Chronicle reports. Circumcision still remains the most common surgery in the country, and the U.S. is one of the few developed nations where a majority of male infants are circumcised (Konrad, AP/Houston Chronicle, 6/18).

Source: Kaiser Daily HIV/AIDS Report - Tuesday, June 19, 2007



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## PREVENTION ISSUES AND CHALLENGES

### Uganda Female Condom-Distribution Program Halted Over Complaints That Condoms Were Not User Friendly, Official Says

A Ugandan program that distributes female condoms has been halted until further research is conducted because many women complained about the condoms, James Kigozi, spokesperson for the Uganda AIDS Commission, said on Thursday, Uganda's Monitor reports.

The AIDS commission had been conducting a trial of female condom use in the country. Kigozi – speaking to journalists at the National AIDS Research Stakeholders' Workshop in Kampala, Uganda – said that the commission was “forced to halt their distribution because the women who were using them said they were not user friendly.” He added that the women “said their husbands used to complain that they make a lot of noise during sexual intercourse and that they are smelly.”

According to the Monitor, many women have said the condoms were painful and difficult to insert in the vagina prior to sexual intercourse. In addition, Kigozi said that empowerment among women also affected use of the condoms because men often instructed their partners to remove the condoms after they had been inserted.

The condoms were being distributed to prevent transmission of HIV and other sexually transmitted infections, as well as to prevent unintended pregnancies, the Monitor reports. The commission has asked condom manufacturers to ensure that newer versions of the condom are easy to use before introducing them in Uganda, Kigozi said (Nafula, Monitor, 6/2).

Source: Kaiser Daily HIV/AIDS Report - Tuesday, June 5, 2007

### Gay, Deaf and Missing the Message; Deaf People Are Affected by HIV/AIDS at Higher Rates than the Hearing

Advocates worry that that many deaf people are missing out on messages warning of the dangers of risky sex and intravenous drug use.

Statistics are limited, but some activists estimate that deaf people are affected by HIV/AIDS at rates two to 10 times higher than the hearing public. U.S. Department of Health statistics suggest that one in seven deaf people has a history of substance abuse, compared to one in 10 among the hearing.

In August, the Toronto-based Deaf Outreach Program will celebrate its 20th anniversary. Spokesperson Kevin Canning said that for two decades the small, poorly funded organization has been struggling to get the complex message of HIV/AIDS transmission and safe-sex practices to thousands of deaf Canadians whom it fears do not fully understand the issues.

Virginia Gutman of Gallaudet University, a school for the deaf in Washington, D.C., said many gay deaf people are not getting the message about HIV and safe sex. “It’s all about access to information. If there is a public service announcement on the radio, they’re not going to hear it.” The medical care gay deaf people receive may not get the message across either, Gutman said, particularly if the doctor does not sign.

In good news, text messaging and computer video cameras have caused a “sea change” in the way deaf people can participate in the world around them, Gutman said.

Source: CDC HIV/Hepatitis/STD/TB Prevention News Update 06/22/2007  
Original source: Toronto Star (06.22.07): David Graham



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## PREVENTION ISSUES AND CHALLENGES

### **Gates Foundation Gives Glaser Foundation \$9.7M for Research on Pediatric HIV Vaccines; Research To Focus on Breast-Feeding Infants**

The Bill & Melinda Gates Foundation has awarded the Elizabeth Glaser Pediatric AIDS Foundation a five-year, \$9.7 million grant to research and develop experimental HIV vaccines aimed at children, Glaser Foundation President and CEO Pamela Barnes announced Friday on HIV Vaccine Awareness Day, the AP/Houston Chronicle reports. The research will focus on preventing mother-to-child transmission of the virus through breastmilk, according to the Glaser Foundation. The grant will fund eight research studies and up to three pediatric clinical trials of HIV vaccines previously tested among adults. Barnes said nearly 14% of all new HIV cases worldwide occur among infants who contract the virus from their mothers, most of whom rapidly develop AIDS because they lack treatment access (Gordon Blankinship, AP/Houston Chronicle, 5/18). The preclinical research studies will examine issues related to HIV transmission through breastmilk and pediatric immunity.

Researchers have found that an effective vaccine, provided shortly after birth, would not only protect an infant from contracting HIV while breast-feeding but also could offer long-term or even life-long immunity from the virus, according to the Glaser Foundation. The protective vaccine then would allow HIV-positive mothers to safely breast-feed for an extended period of time, providing infants in resource-poor settings with nutritional

and basic health benefits. "We are profoundly grateful to the Gates Foundation for recognizing the special needs of children in the fight against AIDS," Barnes said, adding, "Children have been virtually absent from HIV vaccine research despite having the most to gain from such a discovery." According to Barnes, it is "absolutely vital that we start to include children in HIV vaccine research, or we may miss important discoveries that only pediatric research could reveal."

According to the Glaser Foundation, to date there have been two HIV vaccine trials aimed at preventing mother-to-child HIV transmission, either during childbirth or through breast-feeding (Glaser Foundation release, 5/18). The Glaser Foundation has helped pay for 41 studies related to pediatric HIV/AIDS research since 1988. According to the AP/Chronicle, the Gates Foundation grant nearly equals all the funds the Glaser Foundation spent on HIV/AIDS research from 1988 and 2007 (AP/Houston Chronicle, 5/18).

Source: Kaiser Daily AIDS Summaries: May 18, 2007



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## PREVENTION ISSUES AND CHALLENGES

### Women Using Latex Diaphragm With Condoms Had Same HIV Incidence as Those Who Only Used Condoms, Study Says

Women who used latex diaphragms and condoms as an HIV prevention method had the same HIV incidence as those who only used condoms, according to a study published online on Thursday in advance of the July 14 issue of the journal *Lancet*, the *Wall Street Journal* reports (Chase, *Wall Street Journal*, 7/13).

For the study – funded by a \$37 million grant from the Bill & Melinda Gates Foundation – Nancy Padian of the University of California-San Francisco and colleagues enrolled nearly 5,000 women ages 18 to 49 in South Africa, and Zimbabwe. The researchers followed the study participants for an average of 18 months. Half the participants were given diaphragms, gel lubricant and condoms, while the other half were provided with condoms only. Both groups also received extensive counseling on condom use.

The study found that HIV incidence between the two groups was almost identical, with about 4% of women in both groups becoming HIV-positive annually. According to the study, 158 women who were given diaphragms, lubricant, condoms and counseling became HIV-positive and 151 women who were given condoms and counseling became HIV-positive. Padian said one of the more disappointing and surprising results was that women given diaphragms reported using them 70% of the time. The same group of participants also reported that their partners used condoms 54% of the time, compared with 85% condom usage in the group given condoms only. The almost identical HIV incidence between the two groups might suggest that diaphragm use is at least as effective as condoms at preventing HIV, but because the trial was not designed to compare the two methods, there is no proof of equivalence,

Padian said (Russell, *San Francisco Chronicle*, 7/13).

The study's findings should be investigated further, but they do not "warrant using [diaphragms] as a protective mechanism now," Padian said (Russell, *San Francisco Chronicle*, 7/13). She added, "Condoms remain the only proven barrier method for HIV prevention" (Reuters, 7/12).

#### Comments

"It's very, very disappointing, of course," Padian said, adding, "We were hoping to find a protective effect" (*SF Chronicle*, 7/13). The study's findings are especially disappointing for women "who still can't negotiate condom use by men," Padian said.

Nick Hellmann, interim director of HIV/AIDS and tuberculosis at the Gates Foundation, said although the results of the study are disappointing, they are simply part of the scientific process and will not deter the Gates Foundation from continuing to fund for research. "There have been setbacks, but we know we can do this," Hellmann said, adding, "It's a matter of finding the right intervention."

Zeda Rosenberg, CEO of the International Partnership for Microbicides, said the study provides valuable information for future investigations into such products. "These studies are incredibly difficult to do, but it is a difficulty that can and must be overcome," she said, adding, "Women are at high risk of [HIV] infection throughout the world, and they don't have a means of protecting themselves under their control" (*San Francisco Chronicle*, 7/13).

Source: Kaiser Daily HIV/AIDS Report - Friday, July 13, 2007



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## WOMEN'S HEALTH SPECTRUM

### Briefs from the International Women's Summit: Nairobi, Kenya

#### Support Female Initiative HIV Prevention methods

Delegates at the International Women's conference in Nairobi are demanding for increased resource allocation to support female initiated HIV prevention methods. Speaking on 4th July 2007, at the Women's Networking Corner at the summit, Pauline Irungu of Global Campaign for Microbicides noted that supporting research, production and distribution of female initiated HIV prevention methods will greatly curb the impact of the pandemic on women.

Participants noted that the female condom which is hardly available in most developing countries is the only female-initiated HIV prevention that currently exists. They noted that although female condoms have been introduced in many countries, they tend to be more expensive than male condoms, and are poorly marketed. As a result their supply and uptake in countries hardest hit by AIDS are insufficient. The UNAIDS Report through the Global Coalition on Women and AIDS notes that experiences from Zimbabwe where women groups collected 30 000 signatures of women demanding access to the female condom should be emulated. These women, the report notes prompted the Zimbabwean government to step up imports and enhance social marketing, making a dramatic increase in female condom use.

Notably, an effective microbicide would herald perhaps the biggest breakthrough yet in the struggles against AIDS. A microbicide that is 60% effective could prevent 2.5 million infections over three years, based on the modeling by the London School of Hygiene and Tropical Medicine.

#### Say 'Pediatric HIV or Vertical Transmission! Not Mother-to-Child Transmission'

World Alliance for Breastfeeding Action (WABA) is pledging the world to say Pediatric HIV, Pediatric AIDS or Vertical AIDS, and stop saying mother-to-child transmission (MTCT). In the leaflets that were circulated during the International Women Summit it was noted that no other disease is named for the route of transmission.

"We never hear of mother-to-child-hemophilia, and certainly not aedes-to-homosapien dengue fever! So why should mother be named as the vector as identified by the term Mother-to-Child-Transmission (MTCT) of HIV. Come and support mothers now the group!" noted the leaflets. For more information visit: [www.waba.org.my](http://www.waba.org.my)

#### Involve Men in Addressing HIV and AIDS

Men and boys must play a greater role in addressing gender inequality. Men currently shape much of the world in which women live. However, during the International Women's Summit, it was all a women's affair. There were no forums embracing men as partners in order to help nurture social structures that are more supportive to women.

My personal urge is to the organizers of such forums to find strategies of ensuring that men understand what women are going through. It is men who mostly contribute to violence against women, it is men who contribute to rape, it is men who manage properties, it is men who make decisions, it is men.

see WOMEN'S SUMMIT page 8



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## WOMEN'S HEALTH SPECTRUM

### Almost Half of Rural Indian Women Have Not Heard of HIV/AIDS

About 46% of women living in rural areas of India have not heard of HIV/AIDS, according to a recently released report from the Indian government's National Family Health Survey, which is supported by UNICEF and the British and U.S. governments, Reuters reports. According to the report, 57% of women nationwide have heard of the disease, compared with 80% of men. The Indian government has focused its HIV/AIDS prevention efforts on high-risk groups, such as commercial sex workers and injection drug users, rather than on the general population, according to Reuters. An unnamed government official said that the government is "expanding prevention efforts among the general population in rural areas, especially women, over the next five years." Anjali Gopalan – head of the HIV/AIDS advocacy group

Naz Foundation India – said the report "shows women don't have access to information, translating into more women getting infected." According to Reuters, women account for 40% of HIV cases in the country. Many women in rural areas contract the virus from their husbands, who travel to cities and visit commercial sex workers, Reuters reports. HIV/AIDS advocates are urging the government to train health workers and send them to rural areas in an effort to educate rural women about the virus (Zaheer, Reuters, 2/23).

Source: Kaiser Daily HIV/AIDS Report- Feb 26, 2007

### Women's Summit

If women continue closing themselves, hardly will their advocacy agenda and call to change male perceptions to women make sense. In South Africa, for example, the Men as Partners found that almost three quarters (71%) of men participating in workshops agreed that women have the same rights as men, whereas only one quarter of the men in the control groups shared the convictions.

Ideally, my view is that men and boys can be a powerful force in challenging and recasting harmful stereotypes of masculinity, confronting violence against women and taking the responsibility to address gender inequality.

Source: AF-AIDS, Elizaphan Ogechi, Kenya AIDS NGOs Consortium (KANCO) July 6, 2007



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## TESTING, TREATMENT AND CARE

### New Jersey Senate Committee Approves Bill Requiring Pregnant Women, Some Infants To Receive HIV Tests

The New Jersey Senate Health, Human Services and Senior Citizens Committee on Thursday voted to approve a bill (S 2704) that would require all pregnant women and some infants in the state to be tested for HIV unless women choose in writing to opt out of the test, the AP/Long Island Newsday reports (Hester, AP/Long Island Newsday, 6/7).

New Jersey Senate President Richard Codey (D) introduced the bill in May. Current state law requires health care providers to offer

child HIV transmission (Kaiser Daily HIV/AIDS Report, 5/14). The bill also would require infants to be tested for HIV if the mother is HIV-positive or if her HIV status is unknown at the time of birth.

#### Reaction

“The sooner pregnant women can be tested for the HIV infection, the sooner they can be treated,” Health and Senior Services Commissioner Fred Jacobs, who endorsed the bill, said. The legislation “needlessly sacrifices the rights of women and parents” and “deprives women of their moral authority to make decisions for themselves and for children,” Deborah Jacobs, executive director of the American Civil Liberties Union of New Jersey, said, adding, “HIV testing must be informed, voluntary and free from coercion.” Sen. Loretta Weinberg (D), another bill sponsor and health committee member, said, “We are not forcing women into anything. We are merely providing an easier way for women to get tested.” The bill now goes to the Senate for consideration. A spokesperson for Gov. Jon Corzine (D) said the governor is reviewing the bill (AP/Long Island Newsday, 6/7).

In Canada, the Society of Obstetricians and Gynaecologists of Canada recommends “all pregnant women should be offered HIV screening with appropriate counselling. This testing must be voluntary.” The recommendations vary from mandatory testing with opt out approach (Newfoundland and Alberta) to offering/ encouraging screening to all women, to informing women the test is available.

source: <http://www.sogc.org/guidelines/documents/185E-CPG-December2006.pdf>

HIV tests to pregnant women. Codey's bill would require pregnant women to be tested for HIV as early as possible in their pregnancy and again during the third trimester. In addition, physicians and health care providers would be required to provide pregnant women with information about HIV/AIDS, the benefits of being tested, available medical treatment and how treatment can reduce the risk of mother-to-

Source: Kaiser Daily HIV/AIDS Report - Monday, June 11, 2007



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## TESTING, TREATMENT AND CARE

### Ontario to Provide HIV Tests that Give Results in 60 Seconds

As part of efforts to expand anonymous testing and reach more remote and rural communities, Ontario will offer North America's first HIV test providing results in 60 seconds. Together with pre- and post-test counseling, the entire process, in which a drop of the patient's blood is tested, takes about 20 minutes.

The \$350,000 Canadian annual testing initiative is a small price to pay to eliminate the three-week wait currently endured by people testing for HIV, said Health Minister George Smitherman. "I'm a gay man, and I'm one of those that has experienced that gut-wrenching three-week wait. You can't put a price on it," he said.

With 24 more anonymous HIV testing sites scheduled to open by fall, doubling the number of sites, the quick tests are part of an overall effort to link more patients to counseling and treatment. An estimated 30 percent of HIV-positive Canadians do not know they are infected, and Smitherman said the easier screening might convince a few more people to find out their serostatus.

The new tests will also be available through STD clinics and community health centers across Ontario. Among the communities set to host new anonymous testing sites are Kenora, Keewatin, Timmins, Leamington, and Chatham.

The faster HIV test has been very popular with clients at Toronto's Hassle Free Clinic, which has administered it to about 5,000 people. Over 90 percent of clients chose the rapid HIV test over the older HIV test and were highly satisfied with it, said Jane Greer, clinic coordinator.

Source: CDC HIV/Hepatitis/STD/TB Prevention News Update 06/26/2007  
Original Source: The Record (Kitchener-Waterloo 06.23.07): Canadian Press

### Test Every Baby for HIV Pleads Top Specialist

Experts blame HIV/AIDS for the fact that South Africa is one of the few nations with a rising rate of infant mortality. Now, a leading AIDS specialist is asking the government to require HIV tests for all of the 1 million babies born in the country each year.

All South African infants should be tested for HIV when they receive their six-week vaccinations, said Dr. Harrie Moultrie of the University of Witwatersrand's pediatric HIV clinic. Such routine testing would also help the government meet its target, expressed in the National Strategic AIDS Plan of providing cotrimoxazole, an antibiotic that reduces the risk of potentially deadly infections, to all HIV-positive babies by 2011. Moultrie spoke at a sideline session before the start of the third South African National AIDS Conference in Durban.

"Unless we deal with prevention of mother-to-child transmission, there is no way South Africa can cope with the demands for [treatment]," Moultrie said, noting that the public health system is struggling to provide antiretrovirals for current patients.

In addition, Moultrie called on the health department to revise its treatment guidelines for HIV-positive children. Doctors should be able to start children on antiretrovirals based on the presence of AIDS-defining illnesses, he said, rather than on CD4 cell counts.

Source: CDC HIV/Hepatitis/STD/TB Prevention News Update 06/07/2007  
Original Source: Business Day (Johannesburg) (06.06.07): Tamar Kahn



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## TESTING, TREATMENT AND CARE

### **Antibody That Helps Protect Women Against Pregnancy-Associated Malaria Not Present in HIV-Positive Women, Study Says**

An antibody to pregnancy-associated malaria that is present in some women who have been pregnant more than once is not present in HIV-positive women, according to a study published in the May issue of PLoS Medicine, ANI/newKerala.com reports. Women who are pregnant for the first time are at greatest risk pregnancy-associated malaria, a condition that occurs when red blood cells infected with malaria parasites are concentrated in the placenta, according to ANI/newKerala.com. Women who have been pregnant more than once are more resistant to the condition, ANI/newKerala.com reports.

For the study, Kevin Kain, an infectious disease specialist at the University of Toronto, and colleagues collected plasma samples from pregnant Kenyan women, some of whom were HIV-posit-

ive. Researchers found that women who had more than one pregnancy had an antibody that could clear parasites in their placentas, but the antibody was not present among HIV-positive women. According to ANI/newKerala.com, HIV-positive women who have had multiple pregnancies are as susceptible as first-time pregnant women to pregnancy-associated malaria.

Kain said that the study "is only the first step in creating therapeutics" for pregnancy-associated malaria, adding, "We hope to help translate this knowledge into more effective vaccines designed to generate these types of protective antibodies" (ANI/newKerala.com, 5/30).

Source: Kaiser HIV/AIDS Daily Report- June 1, 2007

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